# <u>COSTAR – OFI Support Services</u>

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# LIMITS ON INCIDENTAL EXPENSES FOR UAS CODES 526, 527, 528, 537 AND 538

- Vehicle repairs and related items, e.g., tires, tune-ups, batteries, etc. Limit is \$1,000 during a period of eligibility for case assistance.
- Vehicle insurance. Limit is \$300 during a 12-month period.
- Vehicle operation expense, e.g., driver's license, emissions inspections, needed to secure transportation to and from training or employment. Limit is \$35 per participant during a period of eligibility for cash assistance.
- NOTE: For vehicle expenses, a copy of the title or tag registration, verifying that the client is the owner of the vehicle, must be secured for the case record prior to approval for reimbursement.
- Medical services not available through other sources. Limit is \$500 per period of participation.
- Eye wear not available through other sources. Limit is \$150 per period of participation.
- Dental services not available through other sources. Limit is \$500 per period of participation.
- Wearing apparel needed to participate in training or to accept employment. Limit is \$150 per period of participation.
- Books, Tools and participation supplies needed by client to participate in training or to accept employment when they are not available through the training provider or employer. Limit is \$500 per period of participation.
- Occupation licensing fees needed to perform the occupation for which the client has trained. Limit is \$300 per period of participation.

### Payment Requirements for Programs 526, 527, 528, 537, 538, 549, 559, 569 and 589

#### **Contracted Providers Payment Requirements**

- Copy of signed contract needs to be emailed to the FFS Unit Managers who will distribute to all Regional Accounting offices. Each Regional Accounting Office will complete a yearly PO for the provider in their region.
- Along with the signed contract, Regional Accounting will need a W-9 to ensure the provider is set up correctly for payment and for 1099 filing purposes, and the E-Verify form for federal reporting purposes.

#### **Payments for the Contracted Providers**

- Payments are made based on the client's county of residence
- The sign-in logs will need to be attached to the invoices when submitted for processing
- Since there is a signed contract and a yearly Purchase Order for these services, the supervisor's signature approving the monthly invoices for payment is acceptable. Ensure that the UAS program, entitlement code and number of clients to be accounted for are listed on the invoice.

**NOTE:** The use of Gift Cards, Gas Cards or Bus Passes are acceptable as long as the counties are adhering to the TANF Gift/Gas Card Policy and submitting the tracking logs months.

**NOTE:** Checks or Direct Deposit may be made to the client in ADVANCE, if the caseworker has approved for the purchase of certain allowable expenditures but it is the responsibility of the case manager to obtain original receipt from the client and return them to the Regional Accounting offices to attach as backup to the check copies if applicable. (Policy 1830-2)

#### **Client Related Services paid to the Client**

• Support Service Issuance Detail Screen Print will be used in lieu of an ADPOR and no PO is needed, the SSID Screen Print must contain the following information:

#### **Customer Information**

- Client's Name
- Social Security #
- Mailing Address

#### Supportive Service Details

- Client ID #
- Service Month
- Amount to be paid
- UAS Program
- Entitlement Code
- o Case Manager's Electronic Signature
- All supporting documentation must be approved by the CASE MANAGER and Supervisor, including SSID Screen Print, invoices, statements and receipts
- o Supervisor's signature must be an original,
  - If the case manager sits in the same office, they can hand deliver all supporting documentation (SSID Screen Prints, invoices, statements and receipts) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.
  - If the case manager does not sit in the same office, they can scan all supporting documentation (SSID Screen Prints, invoices, statements and receipts) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.

#### Client Related Services paid to the Vendor

- All expenditures being paid directly to a vendor must have a Purchase Order completed IN ADVANCE. The case manager, with a cc to their supervisor, can send an email to the Regional Accounting FOM and Direct Benefits Supervisor to request the issuance of a purchase order.
- Regional Accounting will create a Purchase Order within 1 business day, then they will scan the purchase order back to the case manager and supervisor. It will be the responsibility of the case manager and supervisor to obtain the appropriate signatures on the purchase order. The purchase order must be attached to the invoices when submitted for payment.
- A W-9 is required of all first-time new vendors in order to set them up in our SMILE system. If this is received in advance, it will speed up the process for reimbursing our vendors.

NOTE 1: Quotes/Declaration Statements can be used for payment of vehicle insurance, but it is the responsibility of the case manager to obtain an original receipt from the agent and return it to the Regional Accounting offices to attach as backup to the check copies.

NOTE 2: Estimates should be obtained to determine the most cost-effective vendor to use but are not used to make payment. Payment cannot be made until the services are completed.

- In order to process payments to a vendor the following items are needed.
  - o Invoice, if vendor does not issue invoices then an ADPOR is needed
  - Purchase Order
  - o SSID Screen Print

The following information must be included on the SSID Screen Print

#### **Customer Information**

- Client's Name
- Social Security #
- Mailing Address

#### **Vendor Information**

- Vendor's Name
- Vendor's Address

#### Supportive Service Details

- Client ID #
- Service Month
- Amount to be paid
- UAS Program
- Entitlement Code
- Case Manager's Electronic Signature
- All supporting documentation must be approved by the case manager and Supervisor, including invoices or ADPORs and backup, Purchase Orders, and SSID Screen Print.
- Supervisor's signature must be an original
  - If the case manager sits in the same office, they can hand deliver all supporting documentation (invoices or ADPOR and backup, Purchase Order and SSID Screen Prints) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.
  - If the case manager does not sit in the same office, they can scan all supporting documentation (invoices or ADPOR and backup, Purchase Order and SSID Screen Prints) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.

### **General Payment Questions:**

- Payments should be processed within 5 days from arrival in the regional accounting office, if they have all appropriate documentation and it is accurate; and if the client/vendor is already set up in our system. If not, then you must allow for an additional two business days.
- If the client or vendor is set up on Direct Deposit, you must also allow for three business days after processing for the funds to post to the client/vendor's account.
- Because all payments are made per client, and clients are tagged to a specific county/region in SMILE, we must pay the invoices according to the county of residence of the client.
- Emergency check request, all approved paperwork will need to be faxed/scanned to the Fiscal Operations Manager and Direct Benefits Supervisor for processing. The check will be released once the Case Manager or Supervisor hand delivers the original documents.
- In unusual circumstances, the use of the Support Services Check Request form may be used in lieu of the SSID screen print for processing checks.

#### **109.27** UAS Code – **526**

**PROGRAM NAME** – Lawbreakers Employment Services (STATE) REFERENCES: TANF Manual 1830, Employment Support Services

**PROGRAM PURPOSE** – To enable Temporary Assistance for Needy Families (TANF) applicants and recipients who is a lawbreaker to find and maintain employment by providing needed education, training or employment services. The goal is for the client to avoid TANF receipt or to leave TANF and be self-sufficient.

**COSTAR REPORTING** – Reported client is the TANF applicant or recipient who is a lawbreaker. Count clients in each entitlement code in which they receive services. **EXCEPTION:** See special COSTAR reporting instructions for entitlement code 27 – GCIS Assessment.

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – Must be a TANF applicant or an active Employment Services participant who is a lawbreaker and have prior Case Manager (CM) approval of expenses. Case Manager approval is based on program policy.

NOTE: A period of eligibility is defined as the period that begins with the date on which the application is made for cash assistance and continuing through the months during which an AU (Assistance Unit) receives cash assistance. If an AU's eligibility for cash assistance ends and the AU reapplies and is subsequent approved for cash assistance, a new period of eligibility begins.

TANF mailbox, <u>TANFHelpDesk@dhs.ga.gov</u> has been set up to respond to questions or comments about TANF and Employment Services. The response time is within 48 hours.

Payment Requirements (click hyperlink)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
16	Recipient Transportation	Cost of transportation to and from activity for actual days of participation. Transportation expenses can be paid upfront or reimbursed as needed to help clients meet the requirement of the TANF Service Plan.
		Examples of transportation costs are the cost of operating a vehicle, bus tokens, taxi fares, van service and parking fees if free parking is not available. \$350 maximum per participant per month.
21	Adult Education/GED Tuition	Tuition Costs, testing fees
22	Other Tuition	Cost of purchasing other short-term training for which HOPE scholarship or other financial aid is not available. Prior approval by Case Manager is required.

# **UAS Code 526 (continued)**

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
26	Recipient Incidentals	Incidental expenses related to training or work-related activity. Prior approval by Case Manager is required. Childcare and Incidental expenses can be paid upfront or reimbursed as needed to help clients meet the requirement of the TANF Service Plan.
		Childcare for participant who does not meet eligibility criteria for CAPS childcare.  Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.
29	Assessment	No maximum is set by policy. Pay for services rendered by provider.
30	Job Readiness /Job Search	Costs associated with purchase of job readiness/job search. May encompass life skills training, motivational activities, etc., as well as interview and application skills.
31	Subsidized Employment	Used to pay employer costs when a client leaves subsidized employment prior to the end of the contracted period.  A pro rata share of the TANF amount is paid to the employer to cover the costs for the month in which the client left.
34	Personal Responsibility Plan Transportation	Cost of transportation to and from activity for actual days of participation.  Includes cost of operating a vehicle, bus tokens, taxi fares, van service, and parking fees if free parking is not available.  \$350 maximum per participant per month.  This is only used when client does not have a Personal
		Work Plan, only a Personal Responsibility Plan.
35	Personal Responsibility Plan Incidentals	Incidental expenses related to fulfillment of a Personal Responsibility Plan requirement. Prior approval by Case Manager is required.
		Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.
		This is only used when client does not have a Personal Work Plan, only a Personal Responsibility Plan.

# **UAS Code 526 (continued)**

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
37	Registration, & Testing Fees	No financial limitations.
38	Required Wearing Apparel	Required wearing apparel (i.e., uniforms) needed to participate in training or to accept employment. Limit is \$150 per participation.
39	Books, Tools and Supplies	\$500 per participation.
40	Occupational Licensing Fees	\$300 per participation.
46	Applicant Transportation	Applicants may be given \$5.00 per day up front to assist with transportation for job search or be reimbursed at a rate of \$5.00 per day.
		A maximum of \$350.00 per participant per month is permitted if necessary.
66	Applicant Incidentals	Incidental expenses associated with applicant job search activity. Prior approval by Case Manager is required.
		Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.

#### **109.27** UAS Code – 527

**PROGRAM NAME** – TANF Employment Services

REFERENCES: TANF Manual 1830, Employment Support Services

**PROGRAM PURPOSE** – To enable Temporary Assistance for Needy Families (TANF) applicants and recipients to find and maintain employment by providing needed education, training or employment services. The goal is for the client to avoid TANF receipt or to leave TANF and be self-sufficient.

**COSTAR REPORTING** – Reported client is the TANF applicant or recipient. Count clients in each entitlement code in which they receive services. **EXCEPTION:** See special COSTAR reporting instructions for entitlement code 27 – GCIS Assessment.

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – Must be a TANF applicant or an active Employment Services participant and have prior Case Manager (CM) approval of expenses. Case Manager approval is based on program policy.

NOTE: A period of eligibility is defined as the period that begins with the date on which the application is made for cash assistance and continuing through the months during which an AU (Assistance Unit) receives cash assistance. If an AU's eligibility for cash assistance ends and the AU reapplies and is subsequent approved for cash assistance, a new period of eligibility begins.

TANF mailbox, <u>TANFHelpDesk@dhs.ga.gov</u> has been set up to respond to questions or comments about TANF and Employment Services. The response time is within 48 hours.

Payment Requirements (click hyperlink)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
16	Recipient Transportation	Cost of transportation to and from activity for actual days of participation. Transportation expenses can be paid upfront or reimbursed as needed to help clients meet the requirement of the TANF Service Plan.  Examples of transportation costs are the cost of operating a vehicle, bus tokens, taxi fares, van service and parking fees if free parking is not available. \$350 maximum per participant per month.
21	Adult Education/GED Tuition	Tuition Costs, testing fees
22	Other Tuition	Cost of purchasing other short-term training for which HOPE scholarship or other financial aid is not available. Prior approval by Case Manager is required.

# **UAS Code 527 (continued)**

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
26	Recipient Incidentals	Incidental expenses related to training or work-related activity. Prior approval by Case Manager is required. Childcare and Incidental expenses can be paid upfront or reimbursed as needed to help clients meet the requirement of the TANF Service Plan.
		Childcare for participant who does not meet eligibility criteria for CAPS childcare.  Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.
29	Assessment	No maximum is set by policy. Pay for services rendered by provider.
30	Job Readiness /Job Search	Costs associated with purchase of job readiness/job search. May encompass life skills training, motivational activities, etc., as well as interview and application skills.
31	Subsidized Employment	Used to pay employer costs when a client leaves subsidized employment prior to the end of the contracted period.  A pro rata share of the TANF amount is paid to the employer to cover the costs for the month in which the client left.
34	Personal Responsibility Plan Transportation	Cost of transportation to and from activity for actual days of participation.  Includes cost of operating a vehicle, bus tokens, taxi fares, van service, and parking fees if free parking is not available.  \$350 maximum per participant per month.  This is only used when client does not have a Personal Work Plan, only a Personal Responsibility Plan.
35	Personal Responsibility Plan Incidentals	Incidental expenses related to fulfillment of a Personal Responsibility Plan requirement. Prior approval by Case Manager is required.  Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.
		This is only used when client does not have a Personal Work Plan, only a Personal Responsibility Plan.

# **UAS Code 527 (continued)**

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
37	Registration, & Testing Fees	No financial limitations.
38	Required Wearing Apparel	Required wearing apparel (i.e., uniforms) needed to participate in training or to accept employment. Limit is \$150 per participation.
39	Books, tools and Supplies	\$500 per participation.
40	Occupational Licensing Fees	\$300 per participation.
46	Applicant Transportation	Applicants may be given \$5.00 per day up front to assist with transportation for job search or be reimbursed at a rate of \$5.00 per day.
		A maximum of \$350.00 per participant per month is permitted if necessary.
66	Applicant Incidentals	Incidental expenses associated with applicant job search activity. Prior approval by Case Manager is required.
		Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.

**109.28** UAS Code – **528** (effective June 1, 2015)

**PROGRAM NAME** – Work Subsidies

**REFERENCES**: Manual Section 1830, Employment Support Services

Manual Section 1840, Employment Support Services

**PROGRAM PURPOSE** – The program is to provide work Support Payments, transitional support services, and job coaching to working families.

The purpose of the Transitional Shelter Assistance Initiative for this program is to help stabilize the TANF Families who are eligible for Work Support Payments as they transition from the TANF rolls to employment. These funds will be used to pay the deposit on the permanent housing as well as for the deposit on gas, electric, water, or other essential utilities; this will not be used to pay for cable, telephone, or other non-essential utilities. TANF Policy Email #2015-02

**COSTAR REPORTING** – Reported client is applicant or former TANF recipient. Count clients in each entitlement code in which they receive services.

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – TANF recipients can receive Work Support Payments, for a period of 12 months during participation using entitlement codes 69 and 98.

A WSP client is not eligible for TANF assistance for 12 months once they start receiving Work Support Payments, unless they have an involuntary loss of their job or have a reduction in work hours.

Transitional Support Services (TSS) can pay for or reimburse the cost of childcare, transportation and incidental expenses to an applicant or recipient who becomes ineligible for cash assistance due to employment, or who declines ongoing TANF cash assistance to stop TANF clock. Reimbursement to a client for these expenditures must be coded to the applicable entitlement codes, see below and should not be added under the Work Support Payments entitlement codes

NOTE: A period of eligibility is defined as the period that begins with the date on which the application is made for cash assistance and continuing through the months during which an AU (Assistance Unit) receives cash assistance. If an AU's eligibility for cash assistance ends and the AU reapplies and is subsequently approved for cash assistance, a new period of eligibility begins.

#### **Transitional Shelter Assistance (TSA)**

**Eligibility:** Families leaving TANF but are eligible for WSP and families who choose to preserve TANF months and are eligible for WSP

**Requirements:** Families must be behind on the rent and in danger of becoming homeless, need assistance to move to a new place, and the lease and utilities are in the client's name. Families leaving TANF must show the ability to maintain monthly shelter payments based on their income.

#### **UAS Code 528 (continued)**

Transitional Shelter Assistance (TSA) is available to families eligible for WSP and may receive up to a total amount of \$1500.00 towards the payment of rental deposits (permanent housing) and utilities (gas, electric, water, or other essential utilities) deposits. Payments will be made directly to the leasing agency and the utility company on behalf of the TANF client. The documents of the verified amounts, the account information for the payees (rental office and utility company), along with the request for payment must be sent to the regional accounting office. The funds will not be used for cable, telephone, or other non-essential utilities. Families leaving TANF will be eligible for TSA once in a lifetime.

TANF mailbox, <u>TANFHelpDesk@dhs.ga.gov</u> has been set up to respond to questions or comments about TANF and Employment Services. The response time is within 48 hours.

Payment Requirements (click hyperlink)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
14	Transitional Shelter Assistance (TSA)-Utility Deposit	Eligible families can receive a one-time payment for essential utility deposits up to \$1500.00
36	Recipient Transitional (TSS) Transportation	Participants can be reimbursed at a rate of \$5.00 per day to assist with transportation needs for continued employment. A maximum of \$350.00 per participant per month is permitted if necessary.  Program Limit: Eligibility period is twelve (12) months beginning the first month of ineligibility for cash benefits or the month in which the case closes due to employment (1830-12)
45	Recipient Transitional (TSS) Incidentals	Transitional incidentals expenses associated with maintaining employment is required to have prior approval by the case manager. Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.
48	Transitional Shelter Assistance (TSA)-Rental Deposit	Eligible families can receive a one-time payment for permanent housing deposit up to \$1500.00

# **UAS Code 528 (continued)**

DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
Applicant Transitional (TSS) Transportation	Participants can be reimbursed at a rate of \$5.00 per day to assist with transportation needs for continued employment. A maximum of \$350.00 per participant per month is permitted if necessary.
	Program Limit: Eligibility period is six months beginning the first month of ineligibility for cash benefits or the month in which the case closes due to employment (1830-12)
Employment Intervention Services (EIS)	Amount can be paid directly to the client; the county will have to have "proof of need" documented in case file. EIS is a short-time, non-recurrent assistance for full time working clients on unpaid leave and is scheduled to return to work within four months, and the AU meets the gross income ceiling (GIC) test.  Program Limit: This is a ONE-TIME lump sum payment that is equivalent to 4 times the maximum benefit level for the TANF client size (1830-10)
Applicant Transitional (TSS) Incidentals	Transitional incidentals expenses associated with maintaining employment is required to have prior approval by the case manager. Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.
Work Support Payments \$200	Eligibility begins the month after recipient becomes ineligible for TANF.  The former TANF AU can receive a cash supplement of \$200 per month for twelve (12) months.
	Applicant Transitional (TSS) Transportation  Employment Intervention Services (EIS)  Applicant Transitional (TSS) Incidentals  Work Support

#### **109.27** UAS Code – 536 (effective June 15, 2015)

**PROGRAM NAME** – TANF – Family Violence Emergency Assistance

REFERENCES: TANF Email# 2015-01, 2015-02

**PROGRAM PURPOSE** – The purpose of the Family Violence Emergency Assistance Initiative is to stabilize families while addressing family violence issues and homelessness.

**COSTAR REPORTING** – Reported client is the TANF applicant or recipient. Count clients in each entitlement code in which they receive services.

#### **KEY PROGRAM OR ELIGIBILITY REQUIREMENTS –**

#### **Eligible Services:**

**Moving Expenses** – Removal and relocation costs of personal property.

Applicants who are eligible for services must seek affordable moving services and provide an official quote of the cost of moving their personal property from the current location to the new location.

**Utilities** – Payment to establish new services or bring delinquent accounts current.

Applicants who are eligible for services must provide official utility estimates for new service or past due bills for current gas, electric, water bills, etc., as needed for the housing unit.

**Rental Assistance** – Payment of first month rent and or a security deposit.

Applicants who are eligible for services must seek affordable housing and provide documents indicating the amount of rent per month and any security deposit amounts on company letterhead from the leasing manager. Verification of rental expenses must include contact information of the property manager/leasing agent.

TANF mailbox, <u>TANFHelpDesk@dhs.ga.gov</u> has been set up to respond to questions or comments about TANF and Employment Services. The response time is within 48 hours.

#### UAS CODE 536 (cont.)

#### **Eligible Applicants:**

To be eligible for services, applicants must:

- Have at least one child under age 18.
- Ensure children who are under age 18 and are school aged are enrolled in school full-time.
- Meet the 300 percent of the Federal Poverty Level (FPL) income guidelines.
- Be a U.S. citizen or be a legal U.S. resident.
- Be a resident of Georgia.
- Provide documents to verify eligibility.
- Create a plan to show how housing expenses will be maintained ongoing.

#### PAYMENT REQUIREMENTS

- All expenditures being paid directly to a vendor must have a Purchase Order completed IN ADVANCE. The case manager, with a cc to their supervisor, can send an email to the Regional Accounting FOM and Direct Benefits Supervisor to request the issuance of a purchase order.
- Regional Accounting will create a Purchase Order within 1 business day, then they will scan the purchase order back to the case manager and supervisor. It will be the responsibility of the case manager and supervisor to obtain the appropriate signatures on the purchase order. The purchase order must be attached to the invoices when submitted for payment.
- A W-9 is required of all first-time new vendors in order to set them up in our SMILE system. If this is received in advance, it will speed up the process for reimbursing our vendors.
- In order to process payments to a vendor the following items are needed.
  - ADPOR
  - Purchase Order

On the ADPOR, the case manager should include:

- Client's Name
- Client ID#
- Vendor's Name
- Vendor's Mailing Address
- UAS Program
- Entitlement Code
- Service Month
- Amount to be paid
- All supporting documentation must be approved by the case manager and Supervisor, including ADPOR, applicable backup and Purchase Orders.
- Supervisor's signature must be an original
  - If the case manager sits in the same office, they can hand deliver all supporting documentation (ADPOR applicable backup, which may include invoices, utility bills/deposit and rental agreement documents and Purchase Order) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.
  - If the case manager does not sit in the same office, they can scan all supporting documentation (ADPOR applicable backup, which may include invoices, utility bills/deposit and rental agreement documents and Purchase Order) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.

#### UAS CODE 536 (cont.)

Emergency check request, all approved paperwork will need to be faxed/scanned to the Fiscal Operations Manager and Direct Benefits Supervisor for processing. The check will be released once the Case Manager or Supervisor hand delivers the original documents.

There is a \$3000 maximum spending per family. A WAIVER from the TANF Unit Manager will be required to be attached to any payments that exceed the \$3000 spending limits.

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
Emergency Shelter	03	Relocation to Permanent Placement
Costs		
		Other Emergency Shelter Options such as short-term
		housing
Emergency	48a	Payment of current rent and up to 2 months future rent
Housing/Financial		can be paid once per family per fiscal year.
Assistance		
		Rent/Deposit paid directly to leasing agent.
		If family and a second land the DECC and the
		If family relocates, all deposits paid by DFCS must be returned
		Teturned
		Documentation of the family's plan indicating how they
		will maintain the changes in order to not need additional
		assistance.
Utility Expenses	48c	Payment of the current utility bills and up to 2 months
2 tillty Expolises		future utility bills may be paid directly to utility
		company once per family per fiscal year.
Litility Dangsits	48d	
Utility Deposits	4ou	Utility deposits may be paid directly to utility company once per fiscal year.
		once per risear year.

#### 109.537 UAS Code - 537

#### **PROGRAM NAME – TANF Two Parent Families**

**PROGRAM PURPOSE** – To enable Temporary Assistance for Needy Families (TANF) applicants and recipients **two-parent families** to find and maintain employment by providing needed education, training or employment services. The goal is for the client to avoid TANF receipt or to leave TANF and be self-sufficient.

**COSTAR REPORTING** – Reported client is the TANF applicant or recipient. Count clients in each entitlement code in which they receive services.

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – Must be a TANF applicant or an active Employment Services participant **from a two-parent family** and have prior Case Manager (CM) approval of expenses. Case Manager approval is based on program policy.

NOTE: A period of eligibility is defined as the period that begins with the date on which the application is made for cash assistance and continuing through the months during which an AU receives cash assistance. If an AU's eligibility for cash assistance ends and the AU reapplies and is subsequent approved for cash assistance, a new period of eligibility begins.

TANF mailbox, <u>TANFHelpDesk@dhs.ga.gov</u> has been set up to respond to questions or comments about TANF and Employment Services. The response time is within 48 hours.

Payment Requirements (click hyperlink)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
16	Recipient Transportation	Cost of transportation to and from activity for actual days of participation.
		Includes the cost of operating a vehicle, bus tokens, taxi fares, van service and parking fees if free parking is not available. \$350 maximum per participant per month.
21	Adult Education/GED tuition	Tuition Costs
22	Other Tuition	Cost of purchasing other short-term training for which HOPE scholarship or other financial aid is not available. Prior approval by Case Manager is required.
26	Recipient Incidentals	Incidental expenses related to training or work-related activity. Prior approval by Case Manager is required. Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.

# **UAS Code 537(continued)**

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
29	Assessment	No maximum is set by policy. Pay for services rendered by provider.
30	Job Readiness/Job Search	Costs associated with purchase of job readiness/job search. May encompass life skills training, motivational activities, etc., as well as interview and application skills.
31	Subsidized Employment	Used to pay employer costs when a client leaves subsidized employment prior to the end of the contracted period.  A pro rata share of the TANF amount is paid to the employer to cover the costs for the month in which the client left.
34	Personal Responsibility Plan Transportation	Cost of transportation to and from activity for actual days of participation. Includes the cost of operating a vehicle, bus tokens, taxi fares, van service, and parking fees if free parking is not available.
		\$350 maximum per participant per month.  This is only used when a client does not have a Personal
		Work Plan, only a Personal Responsibility Plan.
35	Personal Responsibility Plan Incidentals	Incidental expenses related to fulfillment of a Personal Responsibility Plan requirement. Prior approval by Case Manager is required.
		Specific limits (click hyperlink to see spending limits) on various categories expenses are outlined.
		This is only used when a client does not have a Personal Work Plan, only has a Personal Responsibility Plan.
37	Registration, & Testing Fees	No financial limitations.
38	Required Wearing Apparel	Required wearing apparel (i.e., uniforms) needed to participate in training or to accept employment. Limit is \$150 per participation.
39	Books, Tools and Supplies	\$500 per participation.
40	Occupational Licensing Fees	\$300 per participation.

# **UAS Code 537(continued)**

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
46	Applicant Transportation	Applicants may be given \$5.00 per day up front to assist with transportation for job search or be reimbursed at a rate of \$5.00 per day.
		Bus tokens or other means may be used in lieu of up-front cash.
		A maximum of \$350 per participant per month is permitted if necessary.
66	Applicant Incidentals	Incidental expenses associated with applicant job search activity.
		Prior approval by Case Manager is required.
		Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.

#### 109.38 UAS Code 538

#### **PROGRAM NAME - TANF** Legal Immigrants

**PROGRAM PURPOSE** – To enable Temporary Assistance for Needy Families (TANF) applicants and recipients' **legal immigrants** to find and maintain employment by providing needed education, training or employment services. The goal is for the client to avoid TANF receipt or to leave TANF and be self-sufficient.

**COSTAR REPORTING** – Reported client is the TANF applicant or recipient who is a **legal immigrant**. Count clients in each entitlement code in which they receive services.

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – Must be a TANF applicant or an active Employment Services participant who is a legal immigrant and have prior Case Manager (CM) approval of expenses. Case Manager approval is based on program policy.

NOTE: A period of eligibility is defined as the period that begins with the date on which the application is made for cash assistance and continuing through the months during which an AU receives cash assistance. If an AU's eligibility for cash assistance ends and the AU reapplies and is subsequent approved for cash assistance, a new period of eligibility begins.

TANF mailbox, <u>TANFHelpDesk@dhs.ga.gov</u> has been set up to respond to questions or comments about TANF and Employment Services. The response time is within 48 hours.

Payment Requirements (click hyperlink)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
16	Recipient Transportation	Cost of transportation to and from activity for actual days of participation. Includes the cost of operating a vehicle, bus tokens, taxi fares, van service and parking fees if free parking is not available. \$350 maximum per participant per month.
21	Adult Education/ GED tuition	Tuition Costs
22	Other Tuition	Cost of purchasing other short-term training for which HOPE scholarship monies or other financial aid is not available. Prior approval by Case Manager is required.
26	Recipient Incidentals	Incidental expenses related to training or work-related activity. Prior approval by Case Manager is required. Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.
29	Assessment	No maximum is set by policy Pay for services rendered by provider.

# **UAS Code 538 (continued)**

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
30	Job Readiness/Job Search	Costs associated with purchase of job readiness/job search. May encompass life skills training, motivational activities, etc., as well as interview and application skills.
31	Subsidized Employment	Used to pay employer costs when a client leaves subsidized employment prior to the end of the contracted period.
		A pro rata share of the TANF amount is paid to the employer to cover the costs for the month in which the client left.
34	Personal Responsibility Plan Transportation	Cost of Transportation to and from activity for actual days of participation. Includes the cost of operating a vehicle, bus tokens, taxi fares, van service, and parking fees if free parking is not available.
		This is only used when the client does not have a Personal Work Plan, but only a Personal Responsibility Plan.
35	Personal Responsibility Plan Incidentals	Incidental expenses related to fulfillment of a Personal Responsibility Plan requirement. Prior approval by case manager is required. Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.
		This is only used when a client does not have a Personal Work Plan, but only a Personal Responsibility Plan.
37	Registration, & Testing Fees	No financial limitations.
38	Required Wearing Apparel	Required wearing apparel (i.e., uniforms) needed to participate in training or to accept employment. Limit is \$150 per participation.
39	Books, Tools and Supplies	\$500 per participation.
40	Occupational Licensing Fees	\$300 per participation.
46	Applicant Transportation	Applicants may be given \$5.00 per day up front to assist with transportation for job search or be reimbursed at a rate of \$5.00 per day. Bus tokens or other means may be used in lieu of upfront cash.
		A maximum of \$350 per participant per month is permitted if necessary.
66	Applicant Incidentals	Incidental expenses associated with applicant job search activity. Prior approval by Case Manager is required. Specific limits (click hyperlink to see spending limits) on various categories of incidental expenses are outlined.

#### 109.40 UAS Code - 540

#### PROGRAM NAME - SSI Advocacy and Application Management Services

**PROGRAM PURPOSE** – The purpose is to contract with providers to increase the receipt of SSI among TANF recipients with disabilities by assisting them with their initial SSI disability application process, and to assist with any appeals process for any applications that are denied.

**COSTAR REPORTING** – Reported client is the SSI disability applicant. Count should be per client/per day fee.

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – This program is used to expand the services to TANF recipients with disabilities for whom full-time sustainable employment is not an option. These services are being provided to enhance the client's chances of becoming self-sufficient through receipt of SSI disability benefits.

#### **PAYMENT REQUIREMENTS:**

#### **Contracted Providers Payment Requirements**

- Copy of signed contract needs to be emailed to the FFS Unit Managers who will distribute to all Regional Accounting offices. Each Regional Accounting Office will complete a yearly PO for the provider in their region.
- Along with the signed contract, Regional Accounting will need a W-9 to ensure the provider is set up correctly for payment and for 1099 filing purposes, and the E-Verify form for federal reporting purposes.

#### **Payments for the Contracted Providers**

- Payments are made based on the client's county of residence
- Since there is a signed contract and a yearly Purchase Order for these services, the supervisor's signature approving the monthly invoices for payment is acceptable. Ensure that the UAS program, entitlement code, client's name and amount requested are on the invoice.

TANF mailbox, <u>TANFHelpDesk@dhs.ga.gov</u> has been set up to respond to questions or comments about TANF and Employment Services. The response time is within 48 hours.

# **UAS Code 540 (continued)**

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
29	Assessments  EFFECTIVE JULY 1, 2009 – ENTITLEMENT CODE SHOULD HAVE BEEN CHANGED TO 29, NO LONGER 27.	Contracted services are to provide all of the following expectations:  • Assist clients who have or need to apply for SSI with the initial application process and with obtaining medical documentation  • Educate clients on the disability system  • Document all of the successes or failures of client's efforts towards receiving SSI  • Provide transportation to SSI application appointments  • Serve as representative for client at meetings, hearings and appointments related to the SSI application process  • Work with community medical providers to link the client to those community resources  • Function as liaison to the Social Security Administration and advocate for the client  • Assist with obtaining medical records for attorneys, and Social Security Administration
71	Community Service	<ul> <li>Community Service Programs are structured programs and embedded activities in which TANF recipients perform work for the direct benefit of the community under the auspices of public or nonprofit organizations.</li> <li>Community service programs must be limited to projects that serve a useful community purpose in fields such as health, social service, environmental protection, education, urban and rural development, welfare, recreation, public facilities, public safety and childcare.</li> </ul>

#### 109.50 UAS Code – 549 – Food Stamps E&T Transportation Services

**PROGRAM NAME – SNAP (food stamps) E&T Transportation Services REFERENCE:** Food Stamp Manual, 3375, E&T Support Services (ODIS)

PROGRAM PURPOSE – To assist SNAP (food stamp) E&T recipients with becoming gainfully employed by providing needed education, training or employment services. The ultimate goal is to help our customers become self-sufficient and connect them with living wage jobs. Transportation services are provided to enable a participant to get to and from E&T activities.

County Service Area: All Georgia Counties

NOTE: Transportation services are not provided for paid employment. Transportation is not paid to attend orientation or assessment. However, transportation is paid if the participant begins an E&T activity, such as, work experience, training, or educational activity on the same day as the orientation/assessment.

COSTAR REPORTING – Reported client is the person in training.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – Must be an active Employment and Training (E&T) participant, food stamp recipient and may be an Able-Bodied Adult without Dependents (ABAWD) or another food stamp recipient.

NOTE: SNAP E&T Funds are governed by the SNAP E&T Coordinator at the Food & Nutrition Unit under State Operations. Contract them with any questions regarding E&T support services for the SNAP Works Program.

Payment Requirements (click hyperlink)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
16	Recipient Transportation	Covers transportation expenses at the end of participation each month. Participants must provide documentation of their attendance during the month to validate the need for transportation payments.  Reimbursement at \$5.00 per day (Max Up to \$700.00 per month, if paid by provider)
23	Arranged/Provider Transportation	Covers transportation for participants who have no dependable source of transportation up to \$700.00 per month to Provider.
25	E&T Transportation	\$25.00 monthly minimum payment to participant

# **UAS Code 549 (continued)**

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
	PRP	Covers transportation costs of only the first months of an E&T
34	Transportation -	work experience, training, or educational activity. Paid to
	\$25 Up-Front Payment	Participant
	to	
	Participant	
59	EIS Transportation -	Transportation reimbursement is paid directly to the client, the
	\$25 Monthly Maximum	county will have to document proof of need in the SNAP
	Reimbursement	Works Program ES case file.
		NOTE: EIS is a short-time, non-recurrent assistance for full time working customers participating in Job Retention Services. Reimbursements may be given up to 90 days but may not to exceed \$25.00 monthly.

109.59 UAS Code – 559 – Food Stamp E&T Incidentals for E&T Participants in Work Experience/Workfare

### PROGRAM NAME – Food Stamp E&T Incidentals for E&T Participants in Work Experience

**REFERENCES:** Food Stamp Manual, 3375, E&T Support Services (ODIS)

PROGRAM PURPOSE – To assist SNAP (food stamp) E&T recipients with becoming gainfully employed by providing needed education, training or employment services. The ultimate goal is to help our customers become self-sufficient and connect them with living wage jobs. Transportation services are provided to enable a participant to get to and from E&T activities.

County Service Area: All Georgia Counties

COSTAR REPORTING – The reported client is the participant.

KEY PROGRAM AND ELIGIBILITY REQUIREMENTS – Must be an active Employment and Training (E&T) participant, food stamp recipient and may be Able Bodies Adult without Dependents (ABAWD) or another food stamp recipient.

NOTE: SNAP E&T Funds are governed by the SNAP E&T Coordinator at the Food & Nutrition Unit under State Operations. Contact them with any questions regarding E&T support services for the SNAP Works Program.

Payment Requirements (click hyperlink)

#### ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
26	Recipient Incidentals	Expenses which are necessary, reasonable, and directly related to participating in E&T activities such as eyeglasses, drug screens, physicals, and criminal background checks.
		<b>NOTE</b> : Expenses must be required as conditional or participation. These expenses are purchased for the client from the vendor or may be reimbursed to the participant under special circumstances.

NOTE: For those incidentals limited to "per participation", participation begins with referral and ends when a participant is exited from the program.

109.69 - UAS Code – 569 – Food Stamps E&T Incidentals for E&T Participants in Education/Training

PROGRAM NAME – Food Stamps E&T Incidentals for E&T Participants in Education/Training

REFERENCE: Food Stamp Manual, 3375, E&T Support Services (ODIS)

PROGRAM PURPOSE – To assist SNAP (food stamp) E&T recipients with becoming gainfully employed by providing needed education, training or employment services. The ultimate goal is to help our customers become self-sufficient and connect them with living wage jobs. Transportation services are provided to enable a participant to get to and from E&T activities.

County Service Area: All Georgia Counties

COSTAR REPORTING – The reported client is the participant.

KEY PROGRAM AND ELIGIBILITY REQUIREMENTS – Must be an active Employment and Training (E&T) participant, food stamp recipient and may be an Able-Bodied Adult without Dependents (ABAWD) or another food stamp recipient.

NOTE: SNAP E&T Funds are governed by the SNAP E&T Coordinator at the Food & Nutrition Unit under State Operations. Contact them with any questions regarding E&T support services for the SNAP Works Program.

Payment Requirements (click hyperlink)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
		Tuition Costs
21	Adult Education/GED	
		NOTE: No financial limitations.
		Paid directly to the provider unless special circumstances exist. In that event, the participant may be reimbursed if s/he paid the vendor.
		NOTE: No financial limitations.
22	Other Tuition	
		Participation should not exceed 24 months. Paid directly to the provider unless special circumstances exist. In that event, the participant may be reimbursed if s/he paid the vendor.

### **UAS Code 569 (continued)**

### ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
26	Recipient Incidentals	Expenses which are necessary, reasonable, and directly related to participating in E&T activities such as eyeglasses, drug screens, physicals, and criminal background checks.  NOTE: Expenses must be required as conditional or participation. No financial limitations. Paid directly to the provider unless special circumstances exist. In that event, the participant may be reimbursed if s/he paid the vendor.
37	Books, Registration, & Testing Fees	No financial limitations.  Paid directly to the provider unless special circumstances exist.  In that event, the participant may be reimbursed if s/he paid the vendor.

NOTE: For those incidentals limited to "per participation", participation begins with referral and ends when a participant is exited from the program.

# 109.89 - UAS Code - 589 - Food Stamps E&T Incidentals for E&T Participants in other E&T Activity

PROGRAM NAME - Food Stamps E&T Incidentals for E&T Participants in other E&T Activity

REFERENCE: Food Stamp Manual, 3375, E&T Support Services (ODIS)

PROGRAM PURPOSE – To assist SNAP (food stamp) E&T recipients with becoming gainfully employed by providing needed education, training or employment services. The ultimate goal is to help our customers become self-sufficient and connect them with living wage jobs. Transportation services are provided to enable a participant to get to and from E&T activities.

County Service Area: All Georgia Counties

COSTAR REPORTING – The reported client is the participant.

KEY PROGRAM AND ELIGIBILITY REQUIREMENTS – Must be an active Employment and Training (E&T) participant, food stamp recipient and may be an Able-Bodied Adult without Dependents (ABAWD) or another food stamp recipient.

NOTE: Must meet criteria for Job Retention Services. See Section 3370. Expenses which are necessary, reasonable and directly related to maintaining gainful employment such as eyeglasses, drug screens, physicals, criminal background checks, equipment/tools, professional fees and/or testing costs, professional clothing/uniforms. Expense must be required as condition of employment.

NOTE: SNAP E&T Funds are governed by the SNAP E&T Coordinator at the Food & Nutrition Unit under State Operations. Contact them with any questions regarding E&T support services for the SNAP Works Program.

Payment Requirements (click hyperlink)

#### ALLOWABLE ENTITLEMENT CODES

CODE DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
Recipient Incidentals	Expenses which are necessary, reasonable, and directly related to maintaining employment such as eyeglasses, drug screens, physicals, and criminal background checks.  NOTE: Expenses must be required as conditional of participation. These expenses are purchased for participant, not reimbursed. A one-time payment of \$75 per participant, per participation year, may be paid directly to provider. (Can be increased to \$150 by SNAP Works Supervisor approval.)

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### **UAS Code 589 (continued)**

### ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
37	Books, Registration, & Testing Fees	No financial limitations.
		Paid directly to the provider unless special circumstances
		exist. In that event, the participant may be reimbursed if s/he paid the vendor.
20	D ' 1377 ' A 1	\$150 per participation.
38	Required Wearing Apparel	No financial limitations.
		Paid directly to the provider unless special circumstance exists. In that event, the participant may be reimbursed if s/he paid the vendor.
		\$500 per participation.
39	Tools and Supplies	No financial limitations.
		Paid directly to the provider unless special circumstance exists. In that event, the participant may be reimbursed if s/he paid the vendor.
		\$300 per participation.
40	Occupational Licensing Fees	Paid directly to the provider unless special circumstance exists. In that event, the participant may be reimbursed if s/he paid the vendor.
98	Work Support Paymen (PWP)	Dependent upon available funds. One-time payment may not exceed \$75.00. Paid directly to the provider unless special circumstances exist. In that event, the participant may be reimbursed if s/he paid the vendor.

NOTE: For those incidentals limited to "per participation", participation begins with referral and ends when a participant is exited from the program.

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**109.729 UAS Code – 729** (Effective August 2006)

**PROGRAM NAME** – Grandparents Raising Grandchildren (GRG) – CRISP PAYMENTS

**REFERENCE:** Memorandum, July 7, 2006, by Martha Okafor, Deputy Director (New Program) TANF E-mail #10-06 Updated GRG.

**PROGRAM PURPOSE** – This program was established to temporarily pay a monthly subsidy to supplement TANF payments for elderly Grandparents that are raising their grandchildren and for emergency/crisis intervention Services

**COSTAR REPORTING – The reported client is the Grandchild.** 

**KEY PROGRAM AND ELIGIBILITY REQUIREMENTS – Payments** will be approved on age of the Grandparent and if eligible for TANF for the grandchildren.

PAYMENT REQUIREMENTS: Form 281 is completed and signed to start the GRG monthly subsidy payment and a second Form 281 to stop the payments. Form 281 is also used to authorize the emergency/crisis intervention payments. Form must have supervisor's approval and effective date for the monthly subsidy.

Supervisor's signature must be an original

- If the case manager sits in the same office, they can hand deliver all supporting documentation (invoices or ADPOR and backup) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.
- If the case manager does not sit in the same office, they can scan all supporting documentation (invoices or ADPOR and backup) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.

TANF mailbox, <u>TANFHelpDesk@dhs.ga.gov</u> has been set up to respond to questions or comments about TANF and Employment Services. The response time is within 48 hours.

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS	
99	Emergency/Crisis Intervention	To cover costs of emergency needs, such as shelter Utilities, school expenses, furniture, legal expenses associated with gaining formal custody, and other additional expenses incurred when a child comes with grandparents.	es

109.730 UAS Code – 730 (Effective May 1, 2015)

**PROGRAM NAME** – Retro Grandparents Raising Grandchildren (GRG)

**REFERENCE:** Memorandum, July 7, 2006, by Martha Okafor, Deputy Director (New Program) TANF E-mail #10-06 Updated GRG and TANF Policy E-mail #2015-01 updated GRG

**PROGRAM PURPOSE** – This program was established to temporarily pay a monthly subsidy to supplement TANF payments for elderly Grandparents that are raising their grandchildren and for emergency/crisis intervention Services

**COSTAR REPORTING – The reported client is the Grandchild.** 

**KEY PROGRAM AND ELIGIBILITY REQUIREMENTS – Payments** will be approved on age of the Grandparent and if eligible for TANF for the grandchildren.

PAYMENT REQUIREMENTS: Form 281 is completed and signed to start the GRG monthly subsidy payment and a second Form 281 to stop the payments. Form 281 is also used to authorize the emergency/crisis intervention payments. Form must have supervisor's approval and effective date for the monthly subsidy.

Supervisor's signature must be an original

- If the case manager sits in the same office, they can hand deliver all supporting documentation (invoices or ADPOR and backup) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.
- If the case manager does not sit in the same office, they can scan all supporting documentation (invoices or ADPOR and backup) to their supervisor for approval. Supervisor will mail on to the appropriate regional accounting office.

TANF mailbox, <u>TANFHelpDesk@dhs.ga.gov</u> has been set up to respond to questions or comments about TANF and Employment Services. The response time is within 48 hours.

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
01	Monthly Subsidy	\$100.00 per month per child